



**Campaign Finance Section
Financial Report**

Financial Reports are required to be submitted to the Campaign Finance Section of the Office of the State Election Commissioner by all Candidates, Committees, and Organizations. Late or incomplete reports are subject to fines levied by the Commissioner's Office, so please be sure to check all applicable deadlines and file on time. Add extra sheets if necessary.

Full Organization Name: Cullis for Delaware

Account Number: ***** Date of this Report: 10/06/2010

Reporting Period Start: 04/15/2010 Reporting Period End: 10/04/2010

Office: State Senate - District 07

Check the box that applies to this report:

Primary Election	<u> </u> 8-DAY	<u> </u> 30-DAY
General Election	<u> </u> 8-DAY	<u> X </u> 30-DAY
Other Election	<u> </u> 8-DAY	<u> </u> 30-DAY
Special Election	<u> </u> 8-DAY	<u> </u> 30-DAY
	<u> </u> YEAR END	

Final Organization Closing:	<u> </u> YES	<u> X </u> NO	Closing Date:	<u> </u>
Amendment:	<u> </u> YES	<u> X </u> NO		

I authorize that all information included in this Financial Report package is accurate and correct. I agree to abide by all rules and regulations regarding Campaign Finance and the election process in the State of Delaware. I understand that representatives from the Office of the State Election Commissioner will perform an audit of all information provided on this report.

TREASURER SIGNATURE _____ DATE _____

CANDIDATE SIGNATURE _____ DATE _____



STATEMENT OF ACCOUNT BALANCE

Account Number:	*****	Reporting Period:	04/15/2010 FROM	10/04/2010 TO
1. BEGINNING BALANCE (Ending Balance from last reporting period)				\$0.00
2. RECEIPTS:				
A. SCHEDULE A - TOTAL RECEIPTS				\$11,536.27
B. SCHEDULE C-1 - TOTAL IN-KIND RECEIPTS				\$1,128.00
C. SCHEDULE D-1 - TOTAL LOANS RECEIVED				\$4,052.00
D. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS RECEIVED				\$0.00
E. SUBTOTAL (Total of A,B,C,D)				\$16,716.27
3. EXPENDITURES:				
F. SCHEDULE B - TOTAL EXPENDITURES				\$8,579.84
G. SCHEDULE C-2 - TOTAL IN-KIND EXPENDITURES				\$1,128.00
H. SCHEDULE D-2 - TOTAL LOAN PAYMENTS				\$0.00
I. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS PAID				\$0.00
J. SUBTOTAL (Total of F,G,H,I)				\$9,707.84
4. ENDING BALANCE (Beginning Balance plus 2E minus 3J)				\$7,008.43
5. VALUE OF NON-CASH ASSETS (From Schedule F)				\$0.00
6. VALUE OF DISPOSED/TRANSFERRED ASSETS (From Schedule G)				\$0.00
7. VALUE OF LOANS AT END OF PERIOD (Loan Balance From Schedule D-2)				\$4,052.00
8. CLOSE OUT BALANCE (Must equal zero if committee closed)				\$11,060.43



SCHEDULE A - TOTAL RECEIPTS

Account Number: ***** Reporting Period: 04/15/2010 10/04/2010
FROM TO

Itemize all receipts over \$100 for the reporting period. Receipts from sales of items must be itemized if they are over \$50. NOTE: If you receive funds from the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

RECEIPTS IN EXCESS OF \$100:

Date Received	Contributor Name	Contributor Mailing Address	Aggregate Amount	Amount Received
07/30/2010	SENR PAC IN CARE OF F. Gary Simpson	6 W. Clarke Ave. Milford, DE 10063	\$600.00	\$600.00
06/18/2010	Gregory Francis Lavelle	500 Whitby Rd., Wilmington, DE 19803	\$250.00	\$250.00
06/21/2010	Liane Sorenson	417 Snuff Mill Hill Hockessin DE, 19707	\$150.00	\$150.00
06/21/2010	Republican State Committee of Delaware	3301 Landcaster Pike, Suite 48 Wilmington, DE 19805	\$1,500.00	\$1,500.00
06/21/2010	Friends for Michael Ramone	211 Nathan Court Newark, DE 19711	\$150.00	\$150.00
06/21/2010	William E. Wilburn	61 Westwoods Blvd Hockessin, DE 19707	\$250.00	\$250.00
06/21/2010	Michael D Fleming	3 Berkshire Court, Wilmington DE 19807	\$150.00	\$50.00
05/17/2010	Michael D Fleming	3 Berkshire Court, Wilmington DE 19807	\$150.00	\$100.00
06/10/2010	Federick L Cottrell III	604 Wynyard Rd, Wilmington DE 19803	\$125.00	\$125.00
06/10/2010	Ralph E Pearce Jr	P.O. Box 4062 Greenville, DE 19807	\$125.00	\$125.00
06/18/2010	Committee Elect Bill	P.O. Box 3922 Wilmington, DE 19807	\$100.00	\$100.00
06/18/2010	John Jaremchuk Jr.	300 Southern Road, Wilmington DE 19804	\$125.00	\$125.00
06/18/2010	Resonsible Delaware PAC	276 Banning Rd, Camdem Wyoming DE 19934	\$600.00	\$600.00
05/17/2010	Marsha B Metrisko	249 E 48th St. Apt. 8D New York, NY 10017	\$200.00	\$200.00
05/17/2010	Michelle Rollins	P.O. Box 3628 Greenville, DE 19807	\$600.00	\$600.00
07/26/2010	Deborah L. Copeland	3003 Kennett Pike, Wilmington, DE 19807	\$600.00	\$600.00

09/01/2010	Laird Stabler	PO Box 523, Montchanin, DE 19710	\$125.00	\$125.00
09/12/2010	Committee to Elect Nick Manolakos	PO Box 1104, Hockessin, DE 19707	\$200.00	\$200.00
07/06/2010	Charles Copeland	8 Sunnyside Road, Wilmington DE 19807	\$600.00	\$600.00
09/30/2010	New Castle County Republican Committee	Carvel State Office Building, 820 N. French Street, 4th Floor Wilmington DE, 19801	\$1,500.00	\$1,500.00
09/30/2010	John A Krol	1001 General Stevens Drive West Chester PA 19382	\$200.00	\$200.00
09/30/2010	John W Rollins III	1702 N. Bancroft Parkway, Wilmington DE 19806	\$250.00	\$250.00
06/21/2010	Southern Wine and Spirits of Delaware	P.O. Box 10887, Wilmington, DE 19850	\$125.00	\$125.00
TOTAL RECEIPTS IN EXCESS OF \$100				\$8,525.00
TOTAL RECEIPTS NOT IN EXCESS OF \$100				\$3,011.27
GRAND TOTAL RECEIPTS (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2A)				\$11,536.27



SCHEDULE B - TOTAL EXPENDITURES

Account Number: ***** Reporting Period: 04/15/2010 10/04/2010
FROM TO

Itemize all expenditures over \$100 for the reporting period. All expenditures to Political Committees must be itemized, regardless of the amount. NOTE: IF you expend funds to the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

EXPENDITURES IN EXCESS OF \$100:

Date Expended	Payee Name	Payee Mailing Address	Aggregate Amount	Amount Expended
07/23/2010	Capitol Promotions	PO Box 231, Glenside, PA 19038	\$1,528.00	\$1,528.00
07/30/2010	Fred Cullis	601 Oriole Place, Hockessin, DE 19707	\$250.00	\$250.00
07/26/2010	Dr. Don's Buttons	3906 W. Morrow Drive, Glendale, AR 85308	\$129.65	\$129.65
06/25/2010	King Strategic Communications Inc.	4605 Morse Road, Suite 101, Gahanna, OH 43230	\$1,549.00	\$1,549.00
06/18/2010	Hockessin Memorial Hall	1225 Old Lancaster Pike, Hockessin, DE 19707	\$836.00	\$836.00
06/06/2010	Barbara Cullis	601 Oriole Place, Hockessin, DE 19707	\$376.33	\$376.33
05/13/2010	FastSigns	4577 Kirkwood Hwy, Wilmington DE 19808	\$305.00	\$305.00
06/06/2010	Kalorama Network Services Inc.	P.O. Box 21734 Washington, DC 20009	\$640.00	\$640.00
05/07/2010	Top End Design, LLC	172 West Park Place, Newark, DE 19711	\$450.00	\$450.00
04/22/2010	New Castle County Republican Committee	Carvel State Office Building, 820 N. French Street, 4th Floor Wilmington DE, 19801	\$833.00	\$833.00
09/27/2010	Fred Cullis	601 Oriole Place, Hockessin, DE 19707	\$107.97	\$107.97
06/25/2010	Barbara Cullis	601 Oriole Place, Hockessin, DE 19707	\$600.00	\$600.00
08/31/2010	HALF PRICE BANNERS	PO Box 861135 , Shawnee, KS 66286-1135	\$415.00	\$415.00

06/18/2010	Gino Daniello	Disc Jockey, Dr. Crazy, Wilmington, DE 19808	\$250.00	\$250.00
TOTAL EXPENDITURES IN EXCESS OF \$100				\$8,269.95
TOTAL EXPENDITURES NOT IN EXCESS OF \$100				\$309.89
GRAND TOTAL EXPENDITURES (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3F)				\$8,579.84



SCHEDULE C-1 - TOTAL IN-KIND RECEIPTS

Account Number: ***** Reporting Period: 04/15/2010 10/04/2010
FROM TO

Itemize all goods and services contributed at no charge or less than fair market value in excess of \$100 for the reporting period. NOTE: If you receive in-kind contributions from the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

IN-KIND CONTRIBUTIONS IN EXCESS OF \$100:

(NOTE: ESTIMATED VALUE RECEIVED IS FAIR MARKET VALUE LESS ANY PAYMENTS YOU MADE FOR THE GOODS OR SERVICES)

Date Received	Contributor Name	Contributor Mailing Address	Description of Contribution	Est. Amount Received
05/01/2010	Castaldi's Spa and Salon	328 Kennett Pike, Chadds Ford, PA 19317	Gift Basket and Wash, Cut and Blow Dry with Patricia	\$115.00
06/01/2010	High Tech Auto	107 S Dupont Rd Wilmington, DE 19805	\$250 Gift Certificate towards deductible for body work.	\$250.00
TOTAL CONTRIBUTIONS IN EXCESS OF \$100				\$365.00
TOTAL CONTRIBUTIONS NOT IN EXCESS OF \$100				\$763.00
GRAND TOTAL RECEIPTS (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2B)				\$1,128.00



SCHEDULE D-1 - LOANS RECEIVED

Account Number: ***** Reporting Period: 04/15/2010 10/04/2010
FROM TO

All loans in excess of \$50 **RECEIVED DURING THIS REPORTING PERIOD** should be itemized on this schedule. NOTE: These loans must also be listed on Schedule D-2.

LOANS RECEIVED IN EXCESS OF \$50:

Date Received	Lender	Endorser	Description of Security	Int. Rate	Amount Received
04/19/2010	Fred Cullis 601 Oriole Place, Hockessin, DE 19707		Unsecured	0.00%	\$3,000.00
09/21/2010	Fred Cullis 601 Oriole Place, Hockessin, DE 19707		Unsecured	0.00%	\$637.00
08/30/2010	Fred Cullis 601 Oriole Place, Hockessin, DE 19707		Unsecured	0.00%	\$415.00
TOTAL LOANS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2C)					\$4,052.00



SCHEDULE D-2 - LOANS

Account Number: ***** Reporting Period: 04/15/2010 10/04/2010
 FROM TO

All outstanding loans in excess of \$50 must be listed. This includes loans from Lending Institutions, Candidates Personal Funds and Other Contributors.

LOANS IN EXCESS OF \$50:

Date Rec'd	Lender	Endorser	Description	I n t Rate	Orig. Loan Amt	Payments Made	Balance
04/19/2010	Fred Cullis 601 Oriole Place, Hockessin, DE 19707		Unsecured	0.00%	\$3,000.00	\$0.00	\$3,000.00
09/21/2010	Fred Cullis 601 Oriole Place, Hockessin, DE 19707		Unsecured	0.00%	\$637.00	\$0.00	\$637.00
08/30/2010	Fred Cullis 601 Oriole Place, Hockessin, DE 19707		Unsecured	0.00%	\$415.00	\$0.00	\$415.00
TOTAL LOANS (TOTAL PAYMENTS MADE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 3H. TOTAL LOAN BALANCE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 7.)					\$4,052.00	\$0.00	\$4,052.00



SCHEDULE E - EXPENSE REIMBURSEMENTS

Account Number: ***** Reporting Period: 04/15/2010 10/04/2010
FROM TO

All expense reimbursements received by you and paid by you must be itemized.

REIMBURSEMENTS RECEIVED (Monies paid to you as reimbursements for expenses you incurred.)

Date Received	Reimburer	Description of Activity	Activity Date	Total Expense	Reimbursement
TOTAL REIMBURSEMENTS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2D.)					

REIMBURSEMENTS PAID (Monies paid by you to reimburse others for expenses they incurred.)

Date Paid	Payee	Description of Activity	Activity Date	Total Expense	Reimbursement
TOTAL REIMBURSEMENTS PAID (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3I.)					



SCHEDULE F - NON-CASH ASSETS

Account Number: *****

Reporting Period: 04/15/2010
FROM

10/04/2010
TO

Itemize all non-cash assets owned by the organization including those paid for by the organization, lent to the organization and contributed to the organization.

LIST ALL NON-CASH ASSETS

Date Received	Description of Asset	Location of Asset (Physical Address)	Value of Asset
TOTAL ASSET VALUE (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 5.)			



SCHEDULE G - ELIMINATION OF ASSETS

Account Number: *****

Reporting Period: 04/15/2010
FROM

10/04/2010
TO

Itemize all non-cash assets disposed of, transferred or sold by the organization during the reporting period.

LIST ALL ELIMINATED ASSETS

Date Eliminated	Description of Asset	Disposition of Asset	Value Received
TOTAL ASSETS ELIMINATED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 6.)			